

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RW	37	7/13
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	61	503	08-23--1
RESPONSE FORMALITY REVIEW	RW	FB1	10-16-61

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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12	✓
13	✓
14	✓
15	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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